## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number P. 234260

| CLAIMS AS FILED - PART I  |  |   |                   |                              |   |                  | SMALL ENTITY        |                        |    | OTHER THAN          |                        |  |  |  |  |  |
|---|--|---|-------------------|------------------------------|---|------------------|---------------------|------------------------|----|---------------------|------------------------|--|--|--|--|--|
| T <sub>C</sub>  | TAL CLAIMC                                     |   | (Column 1)        |                              | (Column 2)  |                  | TYPE [              | TYPE                   |    | SMALL ENTITY        |                        |  |  |  |  |  |
| TOTAL CLAIMS  |  |   | 36                |                              |   |                  | RATE                | FEE                    | ]  | RATE                | FEE                    |  |  |  |  |  |
| FOR   |  |   | NUMBER FILED      |                              | NUMBER EXTRA  |                  | BASIC FEE           | 355.00                 | OR | BASIC FEE           | 710.00                 |  |  |  |  |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 36 minus 20=      |                              | · 16  |                  | X\$ 9=              |                        | OR | X\$18=              | 288                    |  |  |  |  |  |
| INDEPENDENT CLAIMS  |  |   | minus 3 =         |                              | *   |                  | X40=                |                        | OR | X80=                |                        |  |  |  |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                   |                              |   |                  | +135=               |                        | OR | +270=               |                        |  |  |  |  |  |
| * If the difference in column 1 is less than ze                                       |  |   |                   |                              | r "0" in c  | olumn 2          | TOTAL               |                        | OR | TOTAL               | 998                    |  |  |  |  |  |
| CLAIMS AS AMENDED - PART II   |  |   |                   |                              |   |                  |                     | ·                      |    | OTHER               | THAN                   |  |  |  |  |  |
|   |  | (Column 1)                                |                   | (Column 2)                   |   | (Column 3)       | SMALL               | ENTITY                 | OR | SMALL               | ENTITY                 |  |  |  |  |  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                   | NUM<br>PREVI<br>PAID         | BER<br>OUSLY  | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |
|   | Total  | *   | Minus             | **                           |   | =                | X\$ 9=              |                        | OR | X\$18=              |                        |  |  |  |  |  |
|   | Independent                                    | *<br>NTATION OF M                         | Minus             | ***                          | T CL AIM  | =                | X40=                |                        | OR | X80=                |                        |  |  |  |  |  |
|   | TINOT FRESE                                    | INTATION OF IM                            | JULIPLE DEF       | CINDEIN                      | CLAIN   |                  | +135=               |                        | OR | +270=               |                        |  |  |  |  |  |
|   |  |   |                   |                              |   |                  | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT, FEE |                        |  |  |  |  |  |
|   |  | (Column 1)                                |                   | (Colu                        | mn 2)   | (Column 3)       | ADDIT. I CE         |                        |    | ADDIT, FEE          |                        |  |  |  |  |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVI<br>PAID | BER<br>OUSLY  | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |
|   | Total  | *   | Minus             | **                           |   | =                | X\$ 9=              |                        | OR | X\$18=              | _                      |  |  |  |  |  |
|   | Independent                                    | *   | Minus             | ***                          |   | =                | X40=                |                        | OR | X80=                |                        |  |  |  |  |  |
|   | FIRST PRESE                                    | NTATION OF MI                             | JUITPLE DEP       | ENDEN                        | CLAIM   | <u> L</u>        | +135=               |                        | OR | +270=               | -                      |  |  |  |  |  |
|   |  |   |                   |                              |   |                  |                     |                        | OR | TOTAL<br>ADDIT. FEE | <u>.</u> .             |  |  |  |  |  |
|   |  | ADDIT. FEE                                |                   | •                            | ADDII, I EE   |                  |                     |                        |    |                     |                        |  |  |  |  |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVI<br>PAID | BER<br>OUSLY  | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |  |  |  |
|   | Total  | •   | Minus             | **                           | · · · · · · · · · · · · · · · · · · ·   | =                | X\$ 9=              |                        | OR | X\$18=              |                        |  |  |  |  |  |
|   | Independent                                    | *   | Minus             | ***                          | T CL AINA   | =                | X40=                |                        | OR | X80=                |                        |  |  |  |  |  |
| <b>_</b>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                   |                              |   |                  | +135=               |                        | OR | +270=               |                        |  |  |  |  |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                   |                              |   |                  |                     |                        |    | TOTAL               |                        |  |  |  |  |  |
| ***   | If the "Highest Nu                             | mber Previously P                         | aid For" IN THI   | S SPACE                      | is less tha   | ın 3, enter "3." | ADDIT. FEE          |                        |    | ADDIT. FEE          | L                      |  |  |  |  |  |
|   | The "Highest Nun                               | nber Previously Pa                        | id For" (Total or | Independ                     | The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                  |                     |                        |    |                     |                        |  |  |  |  |  |